### FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

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OMB APPR	OVAK
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hours per response	16,00

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC US	E ONLY
Prefix	Serial
DATE RE	CEIVED
,	•

Name of Offering ( check if this is an a Units of Limited Partnership Intere		•	•	,	
Filing Under (Check box(es) that apply):  Type of Filing:   New Filing	Rule 504 Amendment	Rule 505	⊠ Rule 5	06 Secti	on 4(6) ULOE
	A. BASI	C IDENTIFICA	TION DATA		
1. Enter the information requested about	the issuer	<del> </del>			
Name of Issuer ( check if this is an ame Lehman Brothers Advisor Series - C		changed, and inc	licate change.)		( ABAM BEIGE ( AM BAIGE BURK KERLEURE MAN DU DER
Address of Executive Offices c/o Lehman Brothers Inc. 399 Park	2				
Address of Principal Business Operations (if different from Executive Offices)	08051535				
Brief Description of Business					
Private Investment Fund investing in af	filiated Master Fund	, Lehman Broth	ers Advisor Se	ries –Global Equi	ty Master Fund L.P.
	artnership, already for artnership, to be forme		her (please spec limited liabilit	•	nds exempted company with PROCESSED
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organization	on: (Enter two-let	Month Year 04 08 ter U.S. Postal Sea; FN for other for	rvice abbreviat	Estimated ion for State: FN on)	JUN 1 9 2008  THOMSON RELITERS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6),

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

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### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Conti, Robert					
Business or Residence Addr	ess (Number ar	d Street, City, State, Zip	Code)		
399 Park Avenue, New Yo	rk, NY 10022				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Hotz, Lori	if individual)				
Business or Residence Addr	ess (Number ar	d Street, City, State, Zip	Code)	<del></del>	
399 Park Avenue, New Yo		, <del>,</del> ,,			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			··	
Business or Residence Address	ess (Number an	d Street, City, State, Zip	Code)		<del></del>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number an	d Street, City, State, Zip	Code)	<del></del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number an	d Street, City, State, Zip	Code)	<u> </u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip (	Code)		
	(Use bl	ank sheet, or copy and us	se additional copies of this	sheet, as necess	Sary)

<del>-</del>	<del></del>				B. INFOR	MATION	NABOUT	OFFERI	NG					-
1. Has the issu	ier sold, or	does the is	ssuer inten	d to sell, t	o non-acer	edited inv	estors in th	is offering	?					No
Answer also in Appendix, Column 2, if filing under ULOE.									L	$\boxtimes$				
What is the minimum investment that will be accepted from any individual?									\$500,000*	I				
* Subject to inc	crease or r	eduction	by the Di	rectors in	their sol	•								
3. Does the offering permit joint ownership of a single unit?								Yes ⊠	No					
remuneration person or a	on for solic gent of a b 5) persons t	itation of roker or d	purchasers ealer regis	in connectered with	ction with the SEC a	sales of se and/or with	ecurities in h a state o	the offeri	ng. If a p	erson to be of the br	e listed is oker or de	on or similar an associated aler. If more hat broker or		
Full Name (Last	name first.	it individ	ual)											
Business or Resi 399 Park Avenu	ue, New Yo	ork, NY 10	0022	reet, City,	State, Zip	Code)								
Name of Associated Lehman Brothe		or Dealer	•											
States in Which	Person List	ed Has So	licited or l	ntends to	Solicit Pur	chasers	_ <del></del>			· <u>-</u>				
(Chec	k "All State	es" or chec	k índividu	al States).	•••••	·····					•••••	***************************************	🛭 All S	States
(AL) [IL] [MT] [RI]	(AK) [IN] [NE] [SC]	(AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL( [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	(HII [MS] [OR] [WY]	(ID] [MO] [PA] [PR]		
Full Name (Last	name first.	if individ	ual)		<del>·</del>			· · · · · ·	<del></del> -			<del></del>		
Business or Resi	dence Add	ress (Num	ber and St	rect, City,	State, Zip	Code)	<u> </u>							
Name of Associa	ated Broker	or Dealer			··· <u>-</u>						<del>,</del> -			
States in Which	Person List	ed Has So	licited or I	ntends to	Solicit Pur	chasers						<del></del>		
(Check "Al	l States" or	check ind	ividual Sta	ites)				••••••••		•••••			🗌 All S	States
[AL] [IL] [MT] {RI}	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	{ID] [MO] [PA] {PR}		
Full Name (Last	name first,	if individu	ual)			· · · · · · · · · · · · · · · · · · ·			<del></del>				<u> </u>	
Business or Resi	dence Addi	ress (Num	ber and St	reet, City,	State, Zip	Code)		<del></del>		<del></del>			·	
Name of Associa	ited Broker	or Dealer						·				<del></del>		
States in Which	Person List	ed Has So	licited or I	ntends to 5	Solicit Pure	chasers	···							
(Check "Ali	States" or	check indi	vidual Sta	tes)	•				• • • • • • • • • • • • • • • • • • • •				🗀 Ali S	tates
(AL) (IL) (MT) (RI)	(AK) (IN) (NE) (SC)	[AZ] [IA] [NV] [SD]	(AR) (KS) (NH) (TN)	{CA} [KY} [NJ] [TX]	(CO) [LA] [NM] [UT]	(CT) (ME) (NY) [VT]	(DE   MD   NC   VA	{DC} [MA] [ND] [WA]	(FL)  MI]  OH   WV]	(GA) [MN] [OK] [WI]	(HI) [MS] [OR] [WY]	{ID} [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES  Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$
	Equity	\$2,000,000,000		\$6,750,000
	☐ Common ☐ Preferred			<u></u>
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			\$
	Other (Specify)	¢		·
	Total	\$2,000,000,000	—	\$ \$6.750,000
	J otal	\$2,000,000,000		\$ <u>6,750,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	3	_	\$6,750,000
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	T	Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	.,.,		\$
	Printing and Engraving Costs			\$
	Legal Fees	•••••	$\boxtimes$	\$75,000
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finder's fees separately)			
	Other Expenses (identify)			
	Total		$\boxtimes$	\$ <u>75,000</u>
	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$ <u>1,999,925,000</u>

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5.	Indicate below the amount of the adjusted gross proceed proposed to be used for each of the purposes shown. If purpose is not known, furnish an estimate and check the estimate. The total of the payments listed must equal proceeds to the issuer set forth in response to Part C – Que	the amount for any box to the left of the the adjusted gross				
			Óff Direc Affi	ients to icers, tors, & iliates	Payments to Others	
	Salaries and fees			<del></del>	<u> </u>	
	Purchase of real estate		□ \$		□ \$	
	Purchase, rental or leasing and installation of machinery a	nd equipment	□ \$		□ <b>\$</b>	
	Construction or leasing of plant buildings and facilities		□ \$		□ \$	
	Acquisition of other businesses (including the value o involved in this offering that may be used in exchange for of securities of another issuer pursuant to a merger)	or the assets	□ \$		□ \$	
	Repayment of indebtedness	,,	□ \$		□ \$	
	Working capital		□ \$		□ \$	
	Other (specify): Investment Capital		<b>⊠</b> \$ <u>1,999,9</u>	25,000	□ \$	
	Column Totals		<b>S</b> 1,999,9	25,000	□ <b>s</b>	
	Total Payments Listed (column totals added)			⊠ \$ <u>1,999,92</u>	5,000	
	D. FEDERA	AL SIGNATURE		<del></del>	······································	
follow	suer has duly caused this notice to be signed by the undersi- ing signature constitutes an undertaking by the issuer to fit t of its staff, the information furnished by the issuer to any no	urnish to the U.S. Sec	urities and E	Exchange Com	mission, upon writ	
Issuer	(Print or Type) S	ignature		Date	<del></del>	

Title of Signer (Print or Type)

Director

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS



Lehman Brothers Advisor Series - Global Equity Ltd.

Name of Signer (Print or Type)

Lori Hotz